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ABSTRACT

Categories of effective and ineffective behavior in regard to Goal Six of the Quality Education Program (regarding good health habits) are listed. Both the rationales for areas of effective student behavior and the categories of teacher strategies are also included. (See TM 001 375 for project description.) (MS)

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BOOKLET 6

DESCRIPTION

QUALITY EDUCATION PROGRAM STUDY

GOOD HEALTH HABITS

PENNSYLVANIA

GOAL SIX

AN ESEA TITLE III PROJECT

COORDINATED AND DIRECTED BY:

Office of the County Superintendent
Bucks County Public Schools
Division of Curriculum and Instruction

IN COOPERATION WITH:

The Pennsylvania Department of Education

JUNE 1971

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PUBLIC, PRIVATE, AND PAROCHIAL SCHOOLS

Teachers, administrators, students, and parents in public, private, and parochial schools in the Commonwealth generally, and specifically the pilot areas of Allegheny, Beaver, Bucks, Erie, Luzerne and Westmoreland Counties and the Cities of Erie and Pittsburgh.

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For technical assistance with the Critical Incident Technique, data collection procedures, student and teacher behavioral specifications and related rationales.

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PREFACE

The Bucks County Schools have for some time been committed to improving the quality of the educational offerings for its youth. Characteristic of that commitment was the manner in which officials of the Pennsylvania Department of Education, Bucks County Public Schools, Luzerne County Public Schools, Allegheny County Public Schools, Penn-Trafford School District, Pittsburgh School District, and Erie School District joined together in 1966 to draft the proposal for the Quality Education Program Study (QEPS). Conceived as a complement to Pennsylvania's pioneering efforts to assess the quality of its schools, the study was designed to define and clarify the Ten Goals of Quality Education adopted by the State Board of Education in 1965.

The following booklet is a part of the story of how Q.E.P.S. went about its ambitious task, and the results of that effort. We trust this statement of the behavioral definitions for Pennsylvania's Ten Goals of Quality Education will serve as a guide for the evaluation and improvement of teaching and learning in the schools of the Commonwealth.

Dr. George E. Raab
County Superintendent
Bucks County Public Schools

INTRODUCTION

In recent years there has been an increased interest in goal definition in education. Most efforts toward the establishment and definition of goals seems to take the form of generalizations or descriptive statements. Little, if any, data is available concerning empirical methods for defining educational goals.

Until recently, the "Goals for Quality Education" were not defined in a coherent form. An analysis of this problem revealed that most stated goals have little exact meaning for the practicing educator. Frequently, goals are stated in such general terms that any educator could convince himself that these goals are the purpose that guide his program. Goals are statements of general educational intents. While it is not absolutely necessary for goals to be stated in performance terms, the more clearly these statements are described, the more readily we can develop valid indicators of pupil behavior.

The first step in constructing an instructional program centers upon the need for a set of objectives. An objective refers to the performance or change in behavior a pupil is to exhibit upon completion of instruction. Therefore, meaningful objectives should relate to the "Goals for Quality Education". If one is "to measure objectively the adequacy and efficiency" of educational programs, these objectives must be described in terms of not what the schools do, but in what children do. One must itemize the kinds of behavior that add up to the goals for quality education if we are ever to know how children progress toward the goals or how efficient an educational program may be in furthering such

progress. Specifying goals in this way poses practical problems.[1]

The formulation and adoption of Pennsylvania's Goals of Quality Education represents a major step toward the definition of the State's educational intents, making possible an assessment of its efforts toward the fulfillment of those intents. In an effort to further increase the utility of the goals to the practitioner and evaluator, the Quality Education Program Study was proposed to review, define, and clarify the Ten Goals. Funded in 1968 under E.S.E.A. Title III, Q.E.P.S. made a unique departure from the usual "armchair philosophy" or logical approach to goal definition by deciding to employ the Critical Incident Technique. This technique was used to collect empirical data to define the goals.

The QEPS staff collected critical incident data from teachers, students, and parents from various urban, suburban, and rural areas throughout the State. These data included both student behaviors indicative of achievement of the Ten Goals and teacher behaviors effective in helping students achieve these Goals.

The resulting descriptions or definitions for each of the Ten Goals include: (1) Student Behaviors, (2) Rationales or narrative explanations, and (3) Teacher Strategies. Also, for each Goal QEPS has developed needs assessment instruments to provide the practitioner with a mechanism to systematically gather information to assess its needs and assign priorities to those needs.

[1] Educational Testing Service. A Plan for Evaluating the Quality of Educational Programs in Pennsylvania. Volume One: The Basic Program. Princeton, New Jersey: ETS, Henry S. Dyer, Project Director, Chapter I, pages 1-4 (June 30, 1965).

It is hoped that the resulting products of three years of intensive work devoted to defining Pennsylvania's Ten Goals of Quality Education will provide various segments of the educational community with information and the means to continue to improve the quality of education for the students of Pennsylvania.

Raymond Bernabei
Assistant Superintendent
Bucks County Schools

Donald L. Wright
Project Director, Q.E.P.S.

PROJECT REPORTS

The following is a listing and brief description of the reports produced by the Quality Education Program Study:

Booklet A — Project Description
A description of the project including a background and overview and a detailed report of procedures used to collect, handle, and analyze the data. Includes an appendices.

Booklet B — General Needs Assessment
Instructions
General Needs Assessment Instrument for the Ten Goals.

Booklet C — Characteristics of Incidents and Their Reporters
Gives a tabulation of various characteristics of reporters for each category and sub-category of student behavior.

Goals One through Ten each have two reports. The first is a Description of the goals, containing three basic components: (1) the categories of student behavior, (2) rationales for the areas of effective student behavior, and (3) related teacher strategies. The second report is related to the Needs Assessment of that goal and contains: (1) Instructions, (2) the general needs assessment instrument for that goal, and (3) an analysis of instruments related to that goal. The booklets for the Ten Goals are:

Goal One - Self Understanding
Booklet 1 — Description
Booklet 1A — Needs Assessment

Goal Two - Understanding Others
Booklet 2 — Description
Booklet 2A — Needs Assessment

Goal Three - Basic Skills
Booklet 3 — Description
Booklet 3A — Needs Assessment

	Goal Four - Interest in School and Learning
Booklet 4	Description
Booklet 4A	Needs Assessment
	Goal Five - Good Citizenship
Booklet 5	Description
Booklet 5A	Needs Assessment
	Goal Six - Good Health Habits
Booklet 6	Description
Booklet 6A	Needs Assessment
	Goal Seven - Creativity
Booklet 7	Description
Booklet 7A	Needs Assessment
	Goal Eight - Vocational Development
Booklet 8	Description
Booklet 8A	Needs Assessment
	Goal Nine - Understanding Human Accomplishments
Booklet 9	Description
Booklet 9A	Needs Assessment
	Goal Ten - Preparation for a World of Change
Booklet 10	Description
Booklet 10A	Needs Assessment

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GOAL SIX

QUALITY EDUCATION SHOULD HELP EVERY CHILD ACQUIRE GOOD HEALTH HABITS AND AN UNDERSTANDING OF THE CONDITIONS NECESSARY FOR THE MAINTENANCE OF PHYSICAL AND EMOTIONAL WELL-BEING.

"In his own interest as well as in the interest of society at large, a child should know how to take care of himself and how to keep himself physically fit. He should know what the requirements are for physical and mental health and what practices, harmful to health, should be avoided. Mere knowledge of these matters, however, is not sufficient. In cases where the home has been deficient in encouraging the child to practice sound health habits, the school has an obligation to be aware of the situation and to see that opportunity for remedying the deficiency is provided."[1]

[1]Educational Testing Service. A Plan for Evaluating the Quality of Educational Programs in Pennsylvania, Volume One: The Basic Program. Princeton, New Jersey: ETS, Henry S. Dyer, Project Director, Chapter I, pages 1-4 (June 30, 1965).

SUMMARY OF THE AREAS OF EFFECTIVE BEHAVIOR

Goal 6: Quality education should help every child acquire good health habits and an understanding of the conditions necessary for the maintenance of physical and emotional well-being.

1. STUDENT PRACTICED GOOD HEALTH AND GROOMING HABITS.

2. STUDENT DEMONSTRATED AN AWARENESS OF THE VALUE OF GOOD EATING HABITS OR PROPER WEIGHT.

3. STUDENT ENCOURAGED OTHERS TO PRACTICE GOOD GROOMING OR HEALTH HABITS.

4. STUDENT TOOK CARE OF HIMSELF WHEN HE WAS INJURED OR HAD A HEALTH PROBLEM.

5. STUDENT DEMONSTRATED HE WAS CONCERNED ABOUT ANOTHER'S ILLNESS/ INJURY.

6. STUDENT DEMONSTRATED A CONCERN FOR CONDITIONS CONDUCIVE TO HEALTH.

7. STUDENT PARTICIPATED IN PHYSICAL ACTIVITIES.

8. STUDENT DEMONSTRATED EMOTIONAL MATURITY OR DEMONSTRATED KNOWLEDGE OR INTEREST IN LEARNING ABOUT MENTAL HEALTH.

9. STUDENT DEMONSTRATED A CONCERN FOR ANOTHER'S EMOTIONAL WELL-BEING.

10. STUDENT DEMONSTRATED A CONCERN FOR SAFETY.

11. STUDENT DEMONSTRATED AN AWARENESS OF THE DANGERS INVOLVED IN SMOKING, DRINKING, AND USING DRUGS.

Goal 6/Summary - Effective

0. MISCELLANEOUS.

0.1 Miscellaneous, Goal 6 Effective.

0.2 Miscellaneous, other than Goal 6 Effective.

Goal 6: Quality education should help every child acquire good health habits and an understanding of the conditions necessary for the maintenance of physical and emotional well-being.

CATEGORIES OF EFFECTIVE BEHAVIOR

1. STUDENT PRACTICED GOOD HEALTH AND GROOMING HABITS.

1.1 Student washed his hands at an appropriate time (except before or while preparing food).

1.1-1 Student washed his hands before eating.

1.1-2 Student began or continued the habit of washing his hands after going to bathroom.

1.1-3 Student washed his hands before eating and brushed or cleaned his teeth after eating.

1.2 Student, when eating or planning to eat, took measures to assure sanitary conditions.

1.2-1 Student would eat only in clean surroundings.

1.2-2 Student discarded or washed food that had come into contact with dirt or pesticides.

1.2-4 Student cleaned a utensil before using it.

1.2-5 Student ate without being sloppy or unsanitary.

1.4 Student, before or while preparing food, took measures to assure sanitary conditions.

1.5 Student maintained a clean body.

1.5-1 Student washed his hair.

1.5-2 Student demonstrated regular habits of personal cleanliness.

1.5-4 Student showered, or used soap when showering, after gym class or other physical activity.

1.6 Student demonstrated habits of good grooming and cleanliness.

1.6-1 Student combed or brushed his hair.

1.6-2 Student took action to be neat and clean.

1.6-3 Student showed concern for his appearance.

1.6-4 Student kept himself and his clothing clean.

1.6-5 Student kept his clothing clean.

1.6-6 Student began to perform or improve personal health or grooming routines.

1.7 Student maintained good posture.

1.8 Student maintained good sleep habits.

1.9 Student maintained good dental health habits.

1.9-1 Student began or stated his intention to practice good dental health habits.

1.10 Student would not lend his or use another's personal items (except when his purpose was to prevent germs being spread by mouth).

1.11 Student took precautions so he would not injure his health.

Goal 6/Effective

2. STUDENT DEMONSTRATED AN AWARENESS OF THE VALUE OF GOOD EATING HABITS OR PROPER WEIGHT.

2.1 Student demonstrated that he knew the value of a balanced diet.

2.1-1 Student ate all of a meal, even though he may have disliked some of it.

2.2 Student, by verbal statement or by refraining from activity, indicated that one should not perform physical activity immediately after eating.

2.3 Student indicated he was aware one should not eat too fast.

2.4 Student showed in other ways that he was aware of the value of good eating habits.

2.4-2 Student began to demonstrate that he recognized the value of good eating habits.

2.5 Student, who was overweight, took action to lose weight.

Goal 6/Effective

3. STUDENT ENCOURAGED OTHERS TO PRACTICE GOOD GROOMING OR HEALTH HABITS.

3.1 Student encouraged others to practice good health habits.

3.1-1 Student encouraged others to clean up, wash hands, etc., before eating.

3.1-2 Student encouraged others to clean up before going to bed.

3.2 Student acted to set an example to others to practice good personal hygiene or to be well groomed (other than actions specified elsewhere).

3.3 Student discouraged others from handling or eating food which might have become contaminated or dirty.

3.3-1 Student washed off dropped item for another before letting him eat it.

3.4 Student reprimanded another for not practicing good personal hygiene or good grooming.

3.5 Student encouraged others to take precautions to prevent illness or injury.

Goal 6/Effective

4. STUDENT TOOK CARE OF HIMSELF WHEN HE WAS INJURED OR HAD A HEALTH PROBLEM.

4.1 Student, with an acute health problem not requiring professional medical aid, dealt with it appropriately.

4.2 Student, who was or may have been hurt or ill, sought and followed professional aid or advice.

4.3 Student, who was or may have been hurt or ill, asked for advice or information about it.

4.4 Student, with a chronic health problem, began or continued to follow the prescribed routine.

Goal 6/Effective

5. STUDENT DEMONSTRATED HE WAS CONCERNED ABOUT ANOTHER'S ILLNESS/INJURY.

5.1 Student helped someone who was ill or hurt, or reported his injury or illness to another who could help him (excluding aiding another who had a cold).

5.1-1 Student advised a hurt or ill person to see a doctor or nurse.

5.1-2 Student gave advice to a hurt or ill person on how to take care of himself.

5.2 Student showed concern for another's discomfort/illness in another way.

Goal 6/Effective

6. STUDENT DEMONSTRATED A CONCERN FOR CONDITIONS CONDUCIVE TO HEALTH.

6.1 Student showed he understood the value of proper ventilation and lighting.

6.2 Student took action to avoid germs being spread by mouth.

6.2-1 Student, who had a cold or cough, stayed away from others.

6.2-2 Student covered his mouth or nose when sneezing or coughing, and possibly also turned his head away.

6.2-3 Student turned his head away from others when sneezing or coughing.

6.2-4 Student, when he had a cold or cough, made other efforts to avoid contaminating others.

6.2-5 Student, who was sick in some way other than having a cold or cough, took action so that others would not be exposed to his germs.

6.2-6 Student aided another who had a cold so germs would not be spread.

6.3 Student washed before entering pool.

6.5 Student threw trash into container.

6.6 Student cleaned up a soil or mess which could be or create a health hazard.

6.7 Student did other things with the intention of preventing the spread of germs.

6.7-1 Student combed hair at appropriate place, or refrained from combing hair at an inappropriate place.

6.7-2 Student performed cleaning chores around the eating area before, during or after use.

6.9 Student performed other cleaning chores, but with no apparent implications for health.

6.10 Student recognized a potential health hazard and suggested action (but not including taking action to deal with the potential health hazard).

Goal 6/Effective

7. STUDENT PARTICIPATED IN PHYSICAL ACTIVITIES.

7.1 Student got exercise.

7.1-1 Student ran or jogged.

7.1-2 Student performed track activities on a continuing basis.

7.1-3 Student, in order to perform better in a game or track event, did exercise or other type of preparation, other than reading a book.

7.2 Student played a sport in school.

7.3 Student, in order to perform better in a sport, read a book on how to improve.

7.4 Student did extra work in gymnastics or other physical activities.

7.5 Student performed required exercises better than the rest of the class.

Goal 6/Effective

8. STUDENT DEMONSTRATED EMOTIONAL MATURITY OR DEMONSTRATED KNOWLEDGE OR INTEREST IN LEARNING ABOUT MENTAL HEALTH.

8.1 Student gave evidence that he did not have poor mental health.

8.1-1 Student reacted in an emotionally mature way to a reprimand, either immediately or after a discussion.

8.2 Student, who was upset about something, handled his feelings in a socially acceptable way.

8.2-1 Student, who was upset about a boy-girl situation, talked it over with another.

8.6 Student, who had not done well or as well as usual, accepted personal responsibility for wrongdoing or for inferior work.

8.7 Student with a physical or mental handicap tries his best to perform as well as the rest of the class.

8.8 Student asked to have his seat changed in order to avoid disruption or trouble, so that he could do better work.

8.9 Student, who had finished the required work before others in the class, asked for something to do or for permission to carry out another activity.

8.10 Student who was emotionally immature showed improvement after a session with the teacher.

8.11 Student demonstrated knowledge or contributed information about mental health, the effects of stress, etc.

8.12 Student demonstrated an interest in learning more about mental health or illness.

Goal 6/Effective

9. STUDENT DEMONSTRATED A CONCERN FOR ANOTHER'S EMOTIONAL WELL-BEING.

9.1 Student, concerned about another's emotional well-being, encouraged others to take a positive attitude or action toward one with a problem.

9.2 Student, concerned about the emotional well-being of another who was lonely or shy, took actions to make him feel part of the group.

9.6 Student, concerned about the emotional well-being of another, acted to aid or get help for him.

9.6-1 Student, concerned about another's emotional well-being, assisted the other in dealing with the teacher or with academic work.

9.7 Student, concerned about the emotional well-being of those who were arguing or fighting, took actions to resolve the argument or calm the participants.

9.8 Student encouraged others to avoid negative attitudes or conflict.

Goal 6/Effective

10. STUDENT DEMONSTRATED A CONCERN FOR SAFETY.

10.1 Student demonstrated concern for his own safety.

10.1-1 Student learned why specific practices were unsafe.

10.2 Student demonstrated concern for the safety of others.

10.2-1 Student stopped another from injuring himself or a third person.

10.2-2 Student took note of a safety hazard and informed those in charge so that it could be corrected.

10.2-3 Student corrected a safety hazard.

10.2-4 Student suggested a rule or lecture so that unsafe actions by others could be prevented.

Goal 6/Effective

11. STUDENT DEMONSTRATED AN AWARENESS OF THE DANGERS INVOLVED IN SMOKING, DRINKING, AND USING DRUGS.

11.1 Student showed he was aware of the danger of smoking.

11.1-1 Student did not smoke or stated he would not smoke.

11.1-2 Student refused a cigarette.

11.1-3 Student quit smoking, or made a decision to stop smoking.

11.1-4 Student tried to influence others to stop smoking.

11.2 Student showed he was aware of the danger of drinking.

11.3 Student showed he was aware of the dangers both of drinking and smoking.

11.4 Student showed he was aware of the danger of using drugs.

11.4-1 Student told or asked to tell others that drug use is dangerous.

SUMMARY OF THE AREAS OF INEFFECTIVE BEHAVIOR

Goal 6: Quality education should help every child acquire good health habits and an understanding of the conditions necessary for the maintenance of physical and emotional well-being.

1. STUDENT PRACTICED POOR HEALTH AND GROOMING HABITS.

2. STUDENT DEMONSTRATED A LACK OF AWARENESS OF THE VALUE OF GOOD EATING HABITS.

4. STUDENT DID NOT TAKE PROPER CARE OF HIMSELF WHEN HE WAS INJURED OR HAD A HEALTH PROBLEM.

6. STUDENT DEMONSTRATED A LACK OF CONCERN FOR CONDITIONS CONDUCIVE TO HEALTH.

7. STUDENT DID NOT PARTICIPATE IN PHYSICAL ACTIVITIES.

8. STUDENT DEMONSTRATED EMOTIONAL IMMATURITY OR DEMONSTRATED LACK OF KNOWLEDGE OR INTEREST IN LEARNING ABOUT MENTAL HEALTH.

9. STUDENT DEMONSTRATED A LACK OF CONCERN FOR ANOTHER'S EMOTIONAL WELL-BEING.

10. STUDENT DEMONSTRATED A LACK OF CONCERN FOR SAFETY.

11. STUDENT DEMONSTRATED A LACK OF AWARENESS OF THE DANGERS INVOLVED IN SMOKING, DRINKING, AND USING DRUGS.

Goal 6/Summary - Ineffective

0. MISCELLANEOUS.

0.1 Miscellaneous, Goal 6 Ineffective.

0.2 Miscellaneous, other than Goal 6 Ineffective.

Goal 6. Quality education should help every child acquire good health habits and an understanding of the conditions necessary for the maintenance of physical and emotional well-being.

CATEGORIES OF INEFFECTIVE BEHAVIOR

1. STUDENT PRACTICED POOR HEALTH AND GROOMING HABITS.

1.1 Student did not wash his hands at appropriate times.

1.1-1 Student did not wash his hands before eating.

1.1-2 Student did not wash his hands after going to the bathroom.

1.2 Student, when eating or planning to eat, did not take measures to assure sanitary conditions.

1.2-1 Student ate in unclean surroundings.

1.2-2 Student ate unsanitary food.

1.2-3 Student stored his lunch in a dirty or possibly contaminated area.

1.3 Student put into his mouth an inappropriate object or material.

1.5 Student allowed his body to be unclean.

1.5-1 Student had dirty hair (including dirty, uncombed hair).

1.5-2 Student demonstrated poor habits of personal cleanliness.

1.5-3 Student had an unpleasant body odor (suggesting but not proving lack of cleanliness).

1.5-4 Student failed or refused to shower after gym class or other physical activity.

1.6 Student demonstrated poor habits of grooming and cleanliness.

1.6-1 Student's hair was uncombed; student's hair was unattractive (including long hair on males reported as unattractive by the teacher).

1.6-2 Student was not neat and clean.

1.6-3 Student showed a lack of concern for his appearance.

1.6-4 Student did not keep himself and his clothing clean.

1.6-5 Student wore clothes that were not clean.

Goal 6/Ineffective

1.7 Student failed to maintain good posture.

1.8 Student failed to maintain good sleep habits.

1.9 Student maintained poor dental health habits (not including those which are also poor nutritional habits).

1.9-1 Student, after learning of ill effects of gum chewing on tooth enamel, continued to chew gum.

1.10 Student lent his or used another's personal items (including personal items that are also dirty).

1.11 Student failed to take proper precautions so that he would not injure his health (other than failing to wear prescribed glasses).

1.11-2 Student dressed inappropriately for the weather (including wearing too many clothes inside a building).

1.12 Student, by verbal statement, indicated lack of concern or knowledge about health or grooming.

Goal 6/Ineffective

2. STUDENT DEMONSTRATED A LACK OF AWARENESS OF THE VALUE OF GOOD EATING HABITS.

2.1 Student did not eat a balanced or good diet.

2.1-2 Student ate a lot of sweets or drank a lot of soft drinks.

2.4 Student did other things which indicated he had poor eating habits.

2.4-1 Student did not eat one of his meals.

Goal 6/Ineffective

4. STUDENT DID NOT TAKE PROPER CARE OF HIMSELF WHEN HE WAS INJURED OR HAD A HEALTH PROBLEM.

4.1 Student, with an acute health problem, did not treat it, or treated it improperly (not including actions primarily associated with spreading germs to others).

4.2 Student, who was or may have been hurt or ill, would not seek medical aid.

4.4 Student, with a chronic health problem, did not follow the prescribed routine.

4.4-1 Student would not wear his glasses.

Goal 6/Ineffective

6. STUDENT DEMONSTRATED A LACK OF CONCERN FOR CONDITIONS CONDUCIVE TO HEALTH.

6.2 Student performed acts which may have resulted in germs being spread by mouth.

6.2-1 Student who had a cold or cough did not stay away from others.

6.2-2 Student did not cover his mouth or nose when appropriate.

6.2-3 Student coughed or sneezed on another person or on a commonly used object.

6.2-5 Student, who was sick in some way other than having a cold or cough, exposed others to his germs.

6.2-6 Student propelled contents of his mouth at another person or into a commonly used object (not including vomiting).

6.4 Student threw or left food in the dining area or a concealed place.

6.5 Student did not throw trash into container.

6.7 Student performed other act which may have resulted in germs being spread.

6.7-1 Student combed hair, put on make-up, etc., at inappropriate places.

6.8 Student created a soil or mess, which could be or create a health hazard (not including soiling or wetting himself).

6.9 Student would not perform other cleaning chores, with no apparent implications for health.

Goal 6/Ineffective

7. STUDENT DID NOT PARTICIPATE IN PHYSICAL ACTIVITIES.

    7.1 Student avoided physical activities.

Goal 6/Ineffective

8. STUDENT DEMONSTRATED EMOTIONAL IMMATURITY OR DEMONSTRATED LACK OF KNOWLEDGE OR INTEREST IN LEARNING ABOUT MENTAL HEALTH.

8.1 Student acted in a manner or made statements which could be considered symptomatic of poor mental health.

8.1-2 Student, when he did not complete his homework or assignment, reacted in an emotionally immature way.

8.1-3 Student did not control his emotions or reacted in an emotionally immature way in circumstances other than failure to complete assignment.

8.1-4 Student, who did not obtain the grade he thought he should, carried a grudge against the teacher.

8.1-5 Student exhibited erratic behavior without any apparent provocation.

8.1-6 Student soiled or wet himself.

8.1-7 Student, when he recited in front of a class, showed fear or extreme anxiety.

8.3 Student, who was being teased by another, reacted emotionally.

8.4 Student lied about another or about his own actions.

8.5 Student procrastinated.

Goal 6/Ineffective

9. STUDENT DEMONSTRATED A LACK OF CONCERN FOR ANOTHER'S WELL-BEING.

9.3 Student ridiculed another who lacked ability.

9.4 Student made unpleasant remarks about another's physical appearance.

9.5 Student provoked another into an emotional reaction.

Goal 6/Ineffective

10. STUDENT DEMONSTRATED A LACK OF CONCERN FOR SAFETY.

10.1 Student demonstrated lack of concern for his own safety.

10.2 Student demonstrated lack of concern for the safety of others.

10.2-5 Student carelessly acted in a way which could have resulted or did result in injury to another.

10.2-6 Student deliberately caused an injury to another.

10.2-7 Student physically harmed another.

Goal 6/Ineffective

11. STUDENT DEMONSTRATED A LACK OF AWARENESS OF THE DANGERS INVOLVED IN SMOKING, DRINKING, AND USING DRUGS.

    11.1 Student showed he was not aware of the danger of smoking.

        11.1-1 Student smoked.

    11.2 Student showed he was not aware of the danger of drinking.

    11.4 Student showed he was not aware of the danger of using drugs.

RATIONALE

Goal Six - Area 1

STUDENT PRACTICED GOOD HEALTH AND GROOMING HABITS.

Description

The behaviors in this area deal mainly with good health and grooming habits and cleanliness is stressed. This overtone of cleanliness is apparent throughout the broader aspects of the area; dealing with the student himself, dealing with his eating habits, dealing with his care of personal items such as clothing. If we think of the student as neat, clean, and orderly in these aspects, we have a pretty good general understanding of the behaviors encompassed in this area.

Some of the behaviors in the area do not fall nicely into the niche provided above. Some mention should be given these. These are usually referred to as good "health habits" and include good posture, sleep, and dental habits.

Analysis

Behaviors in this area will occur in a wide variety of home and school settings, since they are common (effectively or ineffectively) to all children, as well as the teacher.

The behaviors in this area may be stimulated by many things. The emotional development of the child will help determine strengths of behaviors in this area and where help is needed. Home environment will alter individual values of health habits. Knowing whether a behavior is desirable or not is a factor often overlooked.

A common mistake made in this area occurs when the assumption is made that good health and grooming habits are common sense or knowledge. This cannot be assumed, nor need the teacher sit around and wait for these

types of behaviors to occur. A wide variety of behaviors in this area can and should be elicited by the teacher and discussed by the class.

Application

The teacher may structure situations to elicit and demonstrate a wide variety of behaviors in this area.

The behaviors illustrated can help most children build these into their bank of health habits. To some students, just finding out certain of these behaviors are desirable may be a revelation. Students should be commended when they begin to exhibit positive behavior for the first time in an area.

Attempts should be made along the way to give meaning to good health habits, by means of linking good health habits with the child's well-being.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 2.

RATIONALE

Goal Six - Area 2

STUDENT DEMONSTRATED AN AWARENESS OF THE VALUE OF GOOD EATING HABITS OR PROPER WEIGHT.

Description

Incidents from this area indicate two distinct types of behaviors: (1) good eating habits for the sake of keeping the body strong and healthy; (2) good eating habits with the idea of maintaining proper weight. The common bond, of course, is a proper and balanced diet.

Because of these distinct behaviors, just as in some cases the actual behavior is the key to the incident, in others the lack of behavior keys the incident. For instance, it may be reported that Johnny, who is overweight, ate lean meat and string beans at a meal. Here the non-behavior, the fact that Johnny did not load up on potatoes or bread is the key behavior in the incident.

Also found in a number of incidents reported is data related to the nutritional values of some foods, effects of exercise on diet, and some reportings on the effects of eating too fast.

Analysis

This behavior, of course, can be observed at school lunches as well as at home. School lunches provide an excellent opportunity to observe the diet of students.

The child brings to school with him attitudes and habits of diet developed through years in the home. The school lunch program can provide a variety of desirable diet combinations, while necessary understandings and motivation of the students can be provided in the classroom through carefully planned units dealing with diet and weight.

RATIONALE

Goal Six - Area 2

Application

Many schools have attempted to provide each student with a well-balanced school lunch. For some, this may be the only balanced meal they have during the day and, hopefully, will provide the desirable pattern they follow in later life. A trend in many schools has been to limit children to a certain number of snacks or desserts they may purchase with their lunch.

If the lunchroom is an excellent place to observe student attitudes and habits of diet, the classroom certainly is the place where the student can learn what constitutes proper diet and weight control. School lunches have always been a popular topic of discussion among students, and the effective teacher may channel this interest into enlightening discussions and activities in the classroom.

This is an area of high interest, especially to young adults, so this self-motivation can well be taken advantage of by the teacher in letting the students take the lead in class activities.

RATIONALE

Goal Six - Area 3

STUDENT ENCOURAGED OTHERS TO PRACTICE GOOD GROOMING OR HEALTH HABITS.

Description

The behaviors in this area entail a student encouraging others to practice good health or grooming habits, either verbally or by setting a good example.

In most cases, the incidents describe a student either offering a suggestion to another or a group that would help them improve on their grooming or health habits, or actually helping another achieve this. For example, the student may suggest that others keep their hair combed neatly during the day, or a girl may actually comb another's hair to show her a style that is becoming.

In a small but significant number of incidents, one student goes so far as to reprimand another for poor health or grooming habits, offering counsel to help the person improve.

Analysis

The behavior occurs in two basic types of settings. First, a one-on-one type of situation in which the behavior is spontaneous and generated, in most cases, by one student responding to a need of another, or detecting something in another that he feels needs improving upon. This setting would be rather difficult to structure in the classroom.

The second, however, shows the student interacting with a group; in most cases, offering a suggestion for a health or grooming aid that he feels would benefit the group.

Prior experience in both the home and school environment is essential in keying this behavior.

RATIONALE

Goal Six - Area 3

The desire to be accepted by his peers is a strong motivational factor in the acceptance of this type of behavior.

Application

Good health and grooming habits provide a wider range of acceptability today than ever before. Also, the children in the schools today are having more say as to the mode of their dress, length of hair, etc.

Students resent adults telling them that their long hair should be cut. The teacher, on the other hand, is in position to structure classroom discussions where the close relationship between good grooming and good health habits can be shown.

In this area, of course, students start very early in their instruction. Advantage of this should be taken in allowing students to work with and help one another. Students and teacher can discuss together how behaviors in this area compare with contemporary standards.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 2.

RATIONALE

Goal Six - Area 4

STUDENT TOOK CARE OF HIMSELF WHEN HE WAS INJURED OR HAD A HEALTH PROBLEM.

Description

The behaviors in this area are of two types: (1) the student administering to himself when sick or injured; (2) seeking the help of a qualified person when not able to help himself.

Also involved are students who seek to find out more about a specific injury or illness, and those who follow a prescribed routine in order to correct the injury or illness.

Analysis

This behavior can happen anywhere, of course, and is totally unpredictable.

In order to exhibit the behaviors involved, the student must have some prior knowledge of injury and illness, and how his body reacts to these. All children have experienced varieties of each by the time they are school age. Some types they can cope with themselves; others, they will need help from an outside source. In either case, one of the types of behavior of this area should be indicated.

In the classroom, the student may learn which type of behavior is appropriate for a series of illnesses or injuries. Motivation is provided by the student's inherent interest in his own well-being.

Application

As mentioned before, since the behaviors cited are unpredictable, they are difficult to observe in an ideal situation. However, it is easy to motivate people on the topic of their own well-being, so classroom situations can be structured.

RATIONALE

Goal Six - Area 4

Students will have had injuries and/or illnesses both unique to themselves and in common with others. They can learn by listening to others' descriptions of these and by suggestions as to whether they can be cared for by the individual or require professional help.

Demonstrations of various life-saving techniques such as first aid, artificial respiration, etc., can prove valuable here once motivation has been established.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 3.

RATIONALE

Goal Six - Area 5

STUDENT DEMONSTRATED HE WAS CONCERNED ABOUT ANOTHER'S ILLNESS/INJURY.

Description

The behaviors in this area are concerned with one individual's reaction toward another who is physically ill or who has injured himself. The behavior features several dimensions:

1. The student cares for another student himself.
2. The student offers the other advice on how to take care of himself.
3. The student solicits aid for another from the teacher.
4. The student suggests that the other should see a doctor or nurse.

Analysis

The very nature of the behavior indicates a wide variety of settings. By the same token, the behavior is stimulated by circumstances beyond the teacher's control. Incident reporting ranged from the classroom, outside classroom, extracurricular, and home situations.

There are some prerequisites necessary for this type of behavior. The student must develop the concept of love and respect for his fellow creatures. A rudimentary knowledge of first aid and signs of illness are necessary to trigger this behavior. The student must be given situations that will help him to develop confidence in the teacher; otherwise this behavior will be hindered.

Application

Teachers from many subject areas should provide opportunities that will enable students to demonstrate positive behavior in this area.

A basic first aid program should be established in the primary

RATIONALE

Goal Six - Area 5

grades and built on through the secondary school. The teacher will find demonstrations useful in this area, with students acting out the parts of the ill, injured, and the helper.

Certain subject areas such as shop and physical education lend themselves well to preventative teaching. The teacher should provide a framework of common sense rules to be followed by the students and go over each one to make sure the student realizes what is expected of him and how to protect himself and others.

Teachers in all subject areas should provide situations that will stimulate feelings of mutual respect and care on the part of the students.

The concept of specialists, such as doctors and nurses, and their value to us is one which can be expressed easily in a variety of different subject areas. This area lends itself well to class discussion and group work.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 3.

RATIONALE

Goal Six - Area 6

STUDENT DEMONSTRATED A CONCERN FOR CONDITIONS CONDUCIVE TO HEALTH.

Description

The behaviors under this area may be grouped under two broad types. Behaviors are indicated that have to do with controlling the physical environment (lighting, ventilation) for the purpose of preventing injury or disease. The major portion of the area consists of behavior whose main purpose is to prevent the spread of germs which are assumed to be present. Under the second type are behaviors such as covering one's mouth when coughing or sneezing, washing before going into a swimming pool, collecting trash and throwing it into an appropriate container, etc.

Analysis

These types of behaviors may be observed equally well in the school or home setting.

Very important to these types of behavior is knowledge on the teacher's part of the student's previously conceived perceptions in this area. The student may be exhibiting ineffective behavior in this area merely because he is not aware of the concept of disease transfer.

Many chances arise in the classroom to illustrate the appropriateness of proper behavior in this area. The teacher will be able to take advantage of the motivation spurred by the student's care for his own well-being.

Application

The classroom provides an environment uniquely adapted for study in this area, with a relatively large group of people in a rather

confined area.

Students may be allowed to compare conditions in the various classrooms and discuss the possible effects on their health.

Classroom situations may be structured so that students, in small or large groups, can discuss illnesses they have had and methods they believe effective in preventing spread of the illness to others.

Audio-visual material may prove valuable in developing the difficult concept of germ transfer.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 1.

RATIONALE

Goal Six - Area 7

STUDENT PARTICIPATED IN PHYSICAL ACTIVITIES.

Description

Very little needs to be added to the statement of behavior in this area. Most of the incidents report on students getting one type of exercise or another in school or at home. The types of activities range from individual exercise to participation in team sports in school.

Also included are incidents where the student seeks counsel or reads a book in order to learn more about an activity.

Analysis

This behavior takes place in school, either during school hours or extra-curricular, and also, at home.

The student may be motivated merely by a desire to stay in condition or stay healthy. He may have a desire to excel in individual or team athletics.

In either case, his degree of excellence will depend on his early experience. Success, of course, depends to some degree on natural ability, but a very quick, strong boy will not be a good wrestler until he learns the moves and holds.

The trained physical education instructor is able to spot athletic ability in a youngster, and can channel his activities accordingly.

It is important for the instructor to illustrate the necessity of exercise to physical well-being, especially to those not enjoying or suited to individual or team sports.

RATIONALE

Goal Six - Area 7

Application

A major concept to be stressed in physical education should be that exercise is necessary for the well-being of everyone, not just the athletes. Classroom situations may be structured to show the benefits of proper exercise to the individual. Examples of badly injured or handicapped persons responding as a result of exercise therapy may be cited.

Students, advanced in physical prowess, can be effectively used in a physical education class, to help others develop skills.

Students should be given direction and time to practice an athletic skill that they enjoy and at which they are able to succeed.

Confidence is one of the most nebulous, yet one of the prime factors in regard to athletic success. Ridicule and abuse have no place in physical activities. The teacher or coach commends the youngster whenever possible.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 1.

RATIONALE

Goal Six - Area 8

STUDENT DEMONSTRATED EMOTIONAL MATURITY OR DEMONSTRATED KNOWLEDGE OR INTEREST IN LEARNING ABOUT MENTAL HEALTH.

Description

Most of the behaviors in this area show a student reacting to his environment, or a stimulus within, in an emotionally mature manner. What differentiates the behaviors are the circumstances or stimuli. For instance, in some cases, the situation is the motivating factor; a reprimand, an errant boy-girl situation. The student is able to accept both gracefully. In other cases, the quality of the student's work is questioned. He accepts responsibility for his poor-quality work. In some instances, the student strives to overcome a physical or mental handicap. Finally, some reportings show the student initiating favorable behavior in this area without a strong stimulus.

Analysis

These types of behaviors are appropriate in the home as well as in school. They are difficult to observe because of their inherent spontaneity.

The child's home environment is a prime factor determining his behavior in this area and will be reflected in school. Hopefully, the child learns to achieve long-term satisfactions rather than demanding immediate rewards. He learns also to substitute intrinsic for extrinsic rewards; that is, he finds satisfaction in his own approval of his behavior rather than as a result of reinforcement by others.

In order to react maturely in social situations, the student must have some insight into the effectiveness of his present behavior and understand how he might revise it according to its appropriateness

to the situation.

Application

The teacher may structure situations in order to elicit behaviors in this area, both the negative and positive aspects. It is much more rewarding and less embarrassing for the student to be shown a weakness in his behavior indirectly. Exaggerated weak behaviors in social situations, and the inevitable reactions of his classmates, illustrate vividly to the student how ludicrous this same behavior must appear when he exhibits it.

Follow-up discussions help students to analyze various behaviors and understand what causes them. Explanations for aggressive behavior and ways to effectively channel it may grow out of class discussions.

Depending on the area of the country, many good films are available in this area.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 2.

RATIONALE

Goal Six - Area 9

STUDENT DEMONSTRATED A CONCERN FOR ANOTHER'S EMOTIONAL WELL-BEING.

Description

The behaviors in this area involve a student coming to the aid of another for any of a variety of reasons. it will be helpful here to list some broad categories to describe those that are being helped:

1. Student with a physical or emotional problem.
2. Student who is lonely or shy.
3. Student having trouble dealing with teacher or academic work.
4. Student arguing or fighting with another.

The behaviors exhibited in helping the above range from verbal support in front of peers to active involvement on behalf of the other.

Analysis

The attitudes controlling this type of behavior stem from a strong influence in the home, and are equally prevalent in both the home and school environments.

The student who acts in this manner is motivated by and aware of the value of all members of a society, and is willing to transmit these feelings to others.

The student who is mature emotionally will exhibit this behavior, showing less self-centered tendencies than those emotionally immature.

Application

A major part of the teacher's role is getting to know the students as well as possible. The teacher can structure small groups so that persons who may need an emotional boost will be matched up with

those who are willing and able to provide it. Hopefully, others in the groups will see the desirability of such behavior.

It will help if the teacher can discover activities that bring out the best in a variety of students, so that the class can see the value each type of child possesses.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 2.

RATIONALE

Goal Six - Area 10

STUDENT DEMONSTRATED A CONCERN FOR SAFETY.

Description

The student, in the behaviors of this area, demonstrates a concern, not only for his own safety, but for the safety of others as well.

The behaviors range from merely recognizing the safety of a practice, to taking action to prevent others from using the improper behavior. In some cases, the student refers a safety hazard to a person of authority. In others, he either corrects it himself or suggests a method of correcting it.

Analysis

The behaviors in this area can be observed in the school setting, and they occur also outside of school.

This behavior depends both on knowledge of hazards and the prior experience of the student. This is especially true of younger children, who by nature would be weaker in both areas than older ones. For this reason, they must be more closely supervised and kept aware of fundamental safety rules.

Motivation is provided both by a desire for self-preservation and a mature respect for the safety of others. The immature student may not be aware of the appropriate behaviors in this area.

Application

Situations may be structured in the classroom to contrast proper and improper behaviors in this area. The use of visual aids may

help to vividly illustrate the consequences of ineffective behavior regarding safety.

The students may initiate standards for effective behavior themselves. For instance in gym class, they may establish that anyone throwing the softball bat is automatically out, having learned the hazards of this practice while growing up.

In some classrooms where the equipment may be unfamiliar, such as woodshop or chemistry lab, instructions as to the operation and regulations regarding the handling of equipment and substances must be worked out by the teacher.

In any school situation the students should be provided situations where they can discuss and understand the need for proper behavior regarding the safety of all.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 1.

RATIONALE

Goal Six - Area 11

STUDENT DEMONSTRATED AN AWARENESS OF THE DANGERS INVOLVED IN SMOKING, DRINKING, AND USING DRUGS.

Description

The area statement, in this case, is very specific in describing the behaviors present, and will not require much embellishment.

The key behaviors under smoking include: (1) the student would not smoke, (2) the student quit smoking or, (3) tried to get others to quit.

Involving drinking, the student would not take a drink or otherwise indicated awareness of the dangers of drinking.

Under drugs, the student showed he was aware of their danger, or tried to persuade others not to use drugs.

Analysis

These vices, unfortunately, are becoming increasingly more prevalent both in home and school among our children, where both effective and ineffective attitudes are reflected. Knowledge of the deleterious effects of abuse of the various substances involved is, of course, essential. However, exaggerated "scare" stories or unsubstantiated claims of knowledge (as in the case of marijuana, the effects of which are only now becoming known) may have a boomerang effect, in that they may convince young people that their adult informants are insincere. A young person may be motivated to smoke, drink, or take drugs by peer pressure or by a need to escape his personal problems. His motivation to avoid these vices can only be to maintain his physical and emotional integrity.

RATIONALE

Goal Six - Area 11

Application

This is an area where outside and community resources can be taken advantage of by the teacher. People like policemen and doctors who see first-hand the detrimental results of these vices are available to pass this knowledge on to the students.

People affected, such as former drug addicts, may make even more of an impact on the children.

It is important that the students are helped to feel confident in their teacher. If such is the case, the student may confide in the teacher when a personal problem arises.

Films and other audio-visual material may be very helpful in illustrating the dangers of smoking, drinking, and taking drugs, as well as showing why they are not necessary.

For further suggestions see also "Teacher Strategies" section of this booklet, Area: 1.

SUMMARY OF TEACHER STRATEGIES

Goal Six

1. TEACHER TAUGHT ABOUT HEALTH OR SAFETY, OR ESTABLISHED HEALTH OR SAFETY RULES OR PROCEDURES.

2. TEACHER ATTEMPTED TO CHANGE OR MODIFY THE HEALTH OR GROOMING HABITS OF A STUDENT OR STUDENTS.

3. TEACHER AIDS A STUDENT WITH AN ACUTE HEALTH PROBLEM, INJURY, ETC.

TEACHER STRATEGIES

Goal Six

1. TEACHER TAUGHT ABOUT HEALTH OR SAFETY, OR ESTABLISHED HEALTH OR SAFETY RULES OR PROCEDURES

   1.1 Teacher taught a lesson on health or safety topic.

      1.1-1 Teacher taught a lesson on dental health.

      1.1-2 Teacher taught a lesson on smoking.

      1.1-3 Teacher taught a lesson on drinking.

      1.1-4 Teacher taught a lesson on drug use (abuse).

      1.1-5 Teacher taught a lesson on or talked about the value of exercise or taught exercises or the proper way to do an exercise.

      1.1-6 Teacher taught a lesson on safety.

      1.1-7 Teacher taught a lesson on cleanliness.

   1.2 Teacher, in teaching about a health or safety topic, used teaching techniques other than straight lecture or discussion.

      1.2-1 Teacher used games in teaching health or safety.

      1.2-2 Teacher used visitors to help teach health or safety.

      1.2-3 Teacher used classroom participatory activities in teaching health or safety.

      1.2-4 Teacher used audio-visual aids in teaching health or safety.

      1.2-5 Teacher gave special instruction in health or safety to a single student.

   1.3 Teacher encouraged students to do outside reading or reading on their own on health-related matters.

   1.4 Teacher established health or safety rules or procedures.

   1.5 Teacher explained reasons for or importance of health or safety rules and practices.

TEACHER STRATEGIES

Goal Six

2. TEACHER ATTEMPTED TO CHANGE OR MODIFY THE HEALTH OR GROOMING HABITS OF A STUDENT OR STUDENTS.

2.1 Teacher, in trying to change poor health or grooming habits or attitudes of a student, discussed the topic with the entire class.

2.2 Teacher, in trying to change poor health or grooming habits or attitudes of a particular student, worked with the individual student.

2.2-1 Teacher talked with, encouraged, and/or complimented a student.

2.2-2 Teacher referred a student to the nurse, doctor, or other professional, or asked a professional to talk with the student.

2.2-3 Teacher involved the student's parents.

2.3 Teacher tried to aid a student who was immature, who was upset, who had emotional or other problems of a mental health nature, or who had potential mental health problems.

2.3-1 Teacher or counselor talked with the student.

2.3-2 Teacher used games or other innovative methods to help the student.

2.3-3 Teacher arranged for professional help for the student, referred student to specialists, and/or involved the student's parents.

3. TEACHER AIDED A STUDENT WITH AN ACUTE HEALTH PROBLEM, INJURY, ETC.

3.1 Teacher gave first-aid attention to a student who needed it.

3.2 Teacher gave a student instructions on first-aid attention.

3.3 Teacher suggested a student visit the nurse, doctor, etc.

BOOKLET 6–A
NEEDS ASSESSMENT

ED 063371

QUALITY EDUCATION PROGRAM STUDY

GOOD HEALTH HABITS

PENNSYLVANIA
GOAL SIX

AN ESEA TITLE III PROJECT

COORDINATED AND DIRECTED BY:
Office of the County Superintendent
Bucks County Public Schools
Division of Curriculum and Instruction

IN COOPERATION WITH:
The Pennsylvania Department of Education

JUNE 1971

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BOOKLET 6–A
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PUBLIC, PRIVATE, AND PAROCHIAL SCHOOLS

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PREFACE

The Bucks County Schools have for some time been committed to improving the quality of the educational offerings for its youth. Characteristic of that commitment was the manner in which officials of the Pennsylvania Department of Education, Bucks County Public Schools, Luzerne County Public Schools, Allegheny County Public Schools, Penn-Trafford School District, Pittsburgh School District, and Erie School District joined together in 1966 to draft the proposal for the Quality Education Program Study (QEPS). Conceived as a complement to Pennsylvania's pioneering efforts to assess the quality of its schools, the study was designed to define and clarify the Ten Goals of Quality Education adopted by the State Board of Education in 1965.

The following booklet is a part of the story of how Q.E.P.S. went about its ambitious task, and the results of that effort. We trust this statement of the behavioral definitions for Pennsylvania's Ten Goals of Quality Education will serve as a guide for the evaluation and improvement of teaching and learning in the schools of the Commonwealth.

Dr. George E. Raab
County Superintendent
Bucks County Public Schools

INTRODUCTION

In recent years there has been an increased interest in goal definition in education. Most efforts toward the establishment and definition of goals seems to take the form of generalizations or descriptive statements. Little, if any, data is available concerning empirical methods for defining educational goals.

Until recently, the "Goals for Quality Education" were not defined in a coherent form. An analysis of this problem revealed that most stated goals have little exact meaning for the practicing educator. Frequently, goals are stated in such general terms that any educator could convince himself that these goals are the purpose that guide his program. Goals are statements of general educational intents. While it is not absolutely necessary for goals to be stated in performance terms, the more clearly these statements are described, the more readily we can develop valid indicators of pupil behavior.

The first step in constructing an instructional program centers upon the need for a set of objectives. An objective refers to the performance or change in behavior a pupil is to exhibit upon completion of instruction. Therefore, meaningful objectives should relate to the "Goals for Quality Education". If one is "to measure objectively the adequacy and efficiency" of educational programs, these objectives must be described in terms of not what the schools do, but in what children do. One must itemize the kinds of behavior that add up to the goals for quality education if we are ever to know how children progress toward the goals or how efficient an educational program may be in furthering such

progress. Specifying goals in this way poses practical problems.[1]

The formulation and adoption of Pennsylvania's Goals of Quality Education represents a major step toward the definition of the State's educational intents, making possible an assessment of its efforts toward the fulfillment of those intents. In an effort to further increase the utility of the goals to the practitioner and evaluator, the Quality Education Program Study was proposed to review, define, and clarify the Ten Goals. Funded in 1968 under E.S.E.A. Title III, Q.E.P.S. made a unique departure from the usual "armchair philosophy" or logical approach to goal definition by deciding to employ the Critical Incident Technique. This technique was used to collect empirical data to define the goals.

The QEPS staff collected critical incident data from teachers, students, and parents from various urban, suburban, and rural areas throughout the State. These data included both student behaviors indicative of achievement of the Ten Goals and teacher behaviors effective in helping students achieve these Goals.

The resulting descriptions or definitions for each of the Ten Goals include: (1) Student Behaviors, (2) Rationales or narrative explanations, and (3) Teacher Strategies. Also, for each Goal QEPS has developed needs assessment instruments to provide the practitioner with a mechanism to systematically gather information to assess its needs and assign priorities to those needs.

[1]Educational Testing Service. A Plan for Evaluating the Quality of Educational Programs in Pennsylvania. Volume One: The Basic Program. Princeton, New Jersey: ETS, Henry S. Dyer, Project Director, Chapter I, pages 1-4 (June 30, 1965).

It is hoped that the resulting products of three years of intensive work devoted to defining Pennsylvania's Ten Goals of Quality Education will provide various segments of the educational community with information and the means to continue to improve the quality of education for the students of Pennsylvania.

Raymond Bernabei
Assistant Superintendent
Bucks County Schools

Donald L. Wright
Project Director, Q.E.P.S.

PROJECT REPORTS

The following is a listing and brief description of the reports produced by the Quality Education Program Study:

Booklet A — Project Description
A description of the project including a background and overview and a detailed report of procedures used to collect, handle, and analyze the data. Includes an appendices.

Booklet B — General Needs Assessment
Instructions
General Needs Assessment Instrument for the Ten Goals.

Booklet C — Characteristics of Incidents and Their Reporters
Gives a tabulation of various characteristics of reporters for each category and sub-category of student behavior.

Goals One through Ten each have two reports. The first is a Description of the goals, containing three basic components: (1) the categories of student behavior, (2) rationales for the areas of effective student behavior, and (3) related teacher strategies. The second report is related to the Needs Assessment of that goal and contains: (1) Instructions, (2) the general needs assessment instrument for that goal, and (3) an analysis of instruments related to that goal. The booklets for the Ten Goals are:

	Goal One - Self Understanding
Booklet 1	Description
Booklet 1A	Needs Assessment
	Goal Two - Understanding Others
Booklet 2	Description
Booklet 2A	Needs Assessment
	Goal Three - Basic Skills
Booklet 3	Description
Booklet 3A	Needs Assessment

	Goal Four - Interest in School and Learning
Booklet 4	Description
Booklet 4A	Needs Assessment
	Goal Five - Good Citizenship
Booklet 5	Description
Booklet 5A	Needs Assessment
	Goal Six - Good Health Habits
Booklet 6	Description
Booklet 6A	Needs Assessment
	Goal Seven - Creativity
Booklet 7	Description
Booklet 7A	Needs Assessment
	Goal Eight - Vocational Development
Booklet 8	Description
Booklet 8A	Needs Assessment
	Goal Nine - Understanding Human Accomplishments
Booklet 9	Description
Booklet 9A	Needs Assessment
	Goal Ten - Preparation for a World of Change
Booklet 10	Description
Booklet 10A	Needs Assessment

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NEEDS ASSESSMENT INSTRUMENTS

General — The general needs assessment instrument is comprised of sixty-three (63) area behavioral statements which encompass all of the Ten Goals of Quality Education. These area statements capsulize the various behaviors of the category scheme derived from student behaviors reported by teachers, parents and students.

Individual — The individual needs assessment instrument is a compilation of the behavior statements taken from the category scheme. These phrases or statements have been edited to accommodate their usage by elementary age children. (The individual needs assessment will be found for the appropriate goal in booklets 1A through 10A).

Test Instrument — The test instruments are a compilation of available tests relating to the Ten Goals of Quality Education. (The test instruments will be found for the appropriate goal in booklets 1A through 10A).

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PURPOSE OF NEEDS ASSESSMENT INSTRUMENTS

General — The general needs assessment instrument can provide the means for a school district to assess its needs relative to the Ten Goals of Quality Education. The need for such assessment may be generated as a result of the Pennsylvania State Quality Assessment Program, or a self-initiated need to identify strengths of the educational program or to identify areas in which greater concentration may be deemed advisable. This instrument could also serve as a medium to acquaint constituents (parents and students) with the Goals of Quality Education.

Individual — The individual needs assessment instrument is designed primarily for student use, under the direction of the teacher. The purpose would be the individual student assessment of his behavior relating to the specific behavioral categories of one or more of the Goals of Education.

HOW TO USE THE GENERAL NEEDS ASSESSMENT INSTRUMENTS

General

This instrument is designed for parent, student, teacher and administrative use, or any combination of these.

The instrument included in this booklet has a rating scale from "most important" through "least important" with accompanying numerals five (5) through one (1). For illustrative purposes, let us assume a school district would request a community group to identify (in their opinion) the most important things the school is or should be accomplishing.

The group would be instructed to read the statement in bold print and the clarifying material below. They should then determine the importance of the area by placing a check above the number representing the priority they consider appropriate in that area. Tabulation would consist merely of adding the total scores for each area. The areas having the highest total score would reflect the group's priority relating to the school program.

Another approach for the use of this instrument would be to transcribe each statement and explanation on separate cards. This would allow the user to sort the items into priority stacks. Five envelopes could be provided and labeled "most important" through "least important".

There are some advantages to using cards. If the school district would utilize the instrument with several groups, or more than once with one group, the cards can be used and reused since no pencil checking is involved. A "free sort" would

simply require the placing of the cards in the appropriately labeled envelope and the tabulation would be the same as the check list tabulation. This "free sort" method might be desirable to compare priority ratings of different groups.

If a district desires, it can structure the sorting process by a "forced sort". The "forced sort" could require equal numbers of cards in each priority envelope or specify a number not to be exceeded in the "most important" and "least important" envelopes and let the others fall somewhere in the three remaining categories of "important", "average importance" or "marginal importance". The "forced sort" would force a few, manageable, top priority items for the school district to determine a course of action to pursue.

School districts may want to compare goal priorities of college oriented parents vs. another group or the school staff itself. Obviously, discretion must be practiced if comparisons are to be made outside of the school community.

The above illustrations allow school districts flexibility for local uses and needs. They are simply illustrations. Local districts may create innovative approaches with the material for their own use.

GENERAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

Quality Education should help every child acquire good health habits and an understanding of the conditions necessary for the maintenance of physical and emotional well-being.

	1 Least Important	2 Marginal Importance	3 Average Importance	4 Important	5 Most Important
Area 1 - HAS GOOD HEALTH AND GROOMING HABITS.	1	2	3	4	5
Washes at proper times; takes pride in having clean hair, clothing, teeth; has good posture and sleep habits; will not lend or borrow comb, handkerchief, etc.; eats meals in a neat manner using only clean silverware and dishes.					
Area 2 - HAS GOOD EATING HABITS AND PROPER WEIGHT.	1	2	3	4	5
Shows understanding of a balanced diet; eats slowly; has proper body weight.					
Area 3 - ENCOURAGES OTHERS TO USE GOOD HEALTH HABITS.	1	2	3	4	5
Tells others to wash before eating, not to eat dirty food, to be careful to prevent illness or injuries.					
Area 4 - TAKES CORRECT ACTION WHEN INJURED OR ILL.	1	2	3	4	5
Asks for help or advice when hurt or sick.					

GOAL SIX - GOOD HEALTH HABITS

	1 Least Important	2 Marginal Importance	3 Average Importance	4 Important	5 Most Important
Area 5 - SHOWS CONCERN FOR ANOTHER'S ILLNESS OR INJURY. Helps someone who is hurt or sick and/or reports it to someone who can help.	1	2	3	4	5
Area 6 - SHOWS CONCERN FOR HEALTH CONDITIONS. Understands need for ventilation; covers mouth when coughing or sneezing; cleans eating area, etc.	1	2	3	4	5
Area 7 - PARTICIPATES IN PHYSICAL ACTIVITIES. Takes part in school athletics or does something to improve in a sport or does some sort of physical exercise.	1	2	3	4	5
Area 8 - SHOWS EMOTIONAL MATURITY. Accepts the blame for doing poor work or something wrong; talks about problems with teacher of others; asks to change seat to do better work, etc.	1	2	3	4	5
Area 9 - SHOWS CONCERN FOR EMOTIONAL WELL-BEING OF OTHERS. Helps a lonely or shy student, encourages other students to do same; helps in school work, dealing with teacher and other students.	1	2	3	4	5

GOAL SIX - GOOD HEALTH HABITS

	1 Least Important	2 Marginal Importance	3 Average Importance	4 Important	5 Most Important
Area 10 - SHOWS CONCERN FOR SAFETY. Suggests rules to prevent accidents; helps others prevent possible injuries; reports to adult(s) in charge of a condition which would lead to personal injury.	1	2	3	4	5
Area 11 - IS AWARE OF DANGERS INVOLVED IN SMOKING, DRINKING, DRUGS. Refuses to smoke, encourages others to stop smoking; realizes danger in drinking and drugs; tells others drug use is dangerous.	1	2	3	4	5

HOW TO USE THE INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

This instrument is designed for self-evaluation or assessment by students. The teacher may select one of the ten Goals of Quality Education, distribute the instrument for that Goal and request the students to place a check above the corresponding number representing "always" through "never". Evaluation of the check lists would reveal the individual strengths and weaknesses relative to a particular Goal.

Those behaviors receiving low scores would indicate both to the student and teacher behavioral goals to which the student should aspire. Pursuit of these goals could entail teacher-student planning of mini-units of study or projects to bring about the desired behavior. On the basis of this, teachers could collaborate on developing units of study or projects to accommodate those students who scored low on the various behavioral items.

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

Quality Education should help every child acquire good health habits and an understanding of the conditions necessary for the maintenance of physical and emotional well-being.

	Never	Seldom	Usually	Often	Always
	1	2	3	4	5
Area 1 - HAS GOOD HEALTH AND GROOMING HABITS.					
1.1 Washes hands at proper times.	___ 1	___ 2	___ 3	___ 4	___ 5
1.2 Is clean when eating.	___ 1	___ 2	___ 3	___ 4	___ 5
1.4 Makes sure all things are clean.	___ 1	___ 2	___ 3	___ 4	___ 5
1.5 Washes hair, keeps rest of body clean.	___ 1	___ 2	___ 3	___ 4	___ 5
1.6 Keeps self clean and well-groomed.	___ 1	___ 2	___ 3	___ 4	___ 5
1.7 Has good posture.	___ 1	___ 2	___ 3	___ 4	___ 5
1.8 Has good sleeping habits.	___ 1	___ 2	___ 3	___ 4	___ 5
1.9 Keeps teeth and gums clean.	___ 1	___ 2	___ 3	___ 4	___ 5
1.10 Does not lend or borrow personal things.	___ 1	___ 2	___ 3	___ 4	___ 5

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

	Never	Seldom	Usually	Often	Always
	1	2	3	4	5
Area 2 - HAS GOOD EATING HABITS AND PROPER WEIGHT.					
2.1 Shows he knows a balanced diet is good for him.	1	2	3	4	5
2.2 Does not exercise right after eating.	1	2	3	4	5
2.3 Does not eat too fast.	1	2	3	4	5
2.4 Shows in other ways that he knows the value of good eating habits.	1	2	3	4	5
2.5 Tries to lose weight, if too heavy.	1	2	3	4	5
Area 3 - ENCOURAGES OTHERS TO USE GOOD HEALTH HABITS.					
3.1 Urges others to keep themselves clean.	1	2	3	4	5
3.2 Sets example for others to practice good personal cleanliness and good grooming.	1	2	3	4	5
3.3 Keeps others from eating food which might have been dirty.	1	2	3	4	5
3.4 Scolds another who does not keep himself and his clothing clean and neat.	1	2	3	4	5
3.5 Tells others to take care of themselves to keep from getting sick or hurt.	1	2	3	4	5

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

	Never	Seldom	Usually	Often	Always
	1	2	3	4	5
Area 4 - TAKES CORRECT ACTION WHEN INJURED OR ILL.					
4.1 Treats himself properly for a health problem for which he does not need a doctor or nurse.	___	___	___	___	___
4.2 Follows advice of doctor or nurse when hurt or ill.	___	___	___	___	___
4.3 Asks what to do when hurt or ill.	___	___	___	___	___
4.4 Follows proper care for a health problem that returns from time to time.	___	___	___	___	___
Area 5 - SHOWS CONCERN FOR ANOTHER'S ILLNESS OR INJURY.					
5.1 Helps someone who is hurt or sick, or tells them to see a doctor or nurse.	___	___	___	___	___
5.2 Shows concern for another's sickness or injury.	___	___	___	___	___

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

		Never	Seldom	Usually	Often	Always
		1	2	3	4	5
Area 6 - SHOWS CONCERN FOR HEALTH CONDITIONS.						
6.1	Shows he understands why fresh air and good lighting are needed.	___ 1	___ 2	___ 3	___ 4	___ 5
6.2	Tries to keep from spreading germs by mouth.	___ 1	___ 2	___ 3	___ 4	___ 5
6.3	Washes before entering pool.	___ 1	___ 2	___ 3	___ 4	___ 5
6.5	Throws trash into wastebasket.	___ 1	___ 2	___ 3	___ 4	___ 5
6.6	Cleans up a mess which could be dangerous to health.	___ 1	___ 2	___ 3	___ 4	___ 5
6.7	Combs hair at proper place; keeps eating area clean to prevent the spread of germs.	___ 1	___ 2	___ 3	___ 4	___ 5
6.9	Does other cleaning chores.	___ 1	___ 2	___ 3	___ 4	___ 5
6.10	Sees something that might be harmful to health and suggests what to do about it.	___ 1	___ 2	___ 3	___ 4	___ 5

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

		Never	Seldom	Usually	Often	Always
		1	2	3	4	5
Area 7 - PARTICIPATES IN PHYSICAL ACTIVITIES.						
7.1	Runs or gets other types of exercise.	___ 1	___ 2	___ 3	___ 4	___ 5
7.2	Plays a sport in school.	___ 1	___ 2	___ 3	___ 4	___ 5
7.3	Reads a book in order to improve in a sport.	___ 1	___ 2	___ 3	___ 4	___ 5
7.4	Does extra work in gymnastics or other physical activity.	___ 1	___ 2	___ 3	___ 4	___ 5
7.5	Does physical exercise better than rest of class.	___ 1	___ 2	___ 3	___ 4	___ 5

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

	Never	Seldom	Usually	Often	Always
	1	2	3	4	5
Area 8 - SHOWS EMOTIONAL MATURITY.					
8.1 Shows that he has good mental health by acting in a grown-up way after scolding.	___ 1	___ 2	___ 3	___ 4	___ 5
8.2 Handles his feelings in an acceptable way when upset about something.	___ 1	___ 2	___ 3	___ 4	___ 5
8.6 Takes blame when he has not done well, or as well as usual in his schoolwork.	___ 1	___ 2	___ 3	___ 4	___ 5
8.7 Tries his best to do as well as the rest of the class, even though he has a physical or mental handicap.	___ 1	___ 2	___ 3	___ 4	___ 5
8.8 Asks to have seat changed so he won't be bothered by others or get into trouble; so he can do better work.	___ 1	___ 2	___ 3	___ 4	___ 5
8.9 Asks for something else to do or permission to do something else when he finishes class-work before others.	___ 1	___ 2	___ 3	___ 4	___ 5
8.10 Shows improvement after teacher talks to him about ungrown-up behavior.	___ 1	___ 2	___ 3	___ 4	___ 5
8.11 Shows he knows about mental health.	___ 1	___ 2	___ 3	___ 4	___ 5
8.12 Shows interest in learning more about mental health or illness.	___ 1	___ 2	___ 3	___ 4	___ 5

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENTS

GOAL SIX - GOOD HEALTH HABITS

	Never	Seldom	Usually	Often	Always
	1	2	3	4	5
Area 9 - SHOWS CONCERN FOR EMOTIONAL WELL-BEING OF OTHERS.					
9.1 Shows concern for the feelings of another with a problem by asking students to be nice to him.	1	2	3	4	5
9.2 Shows concern for the feelings of another who is lonely or shy by trying to make him feel part of the group.	1	2	3	4	5
9.6 Shows concern for the feelings of another by trying to help or get help for him.	1	2	3	4	5
9.7 Shows concern for the feelings of those who were fighting by trying to calm them and help them settle argument.	1	2	3	4	5
9.8 Tries to keep others from fighting or arguing.	1	2	3	4	5
Area 10 - SHOWS CONCERN FOR SAFETY					
10.1 Shows concern for his own safety by learning why doing certain things is unsafe.	1	2	3	4	5
10.2 Shows concern for the safety of others.	1	2	3	4	5

INDIVIDUAL NEEDS ASSESSMENT INSTRUMENT

GOAL SIX - GOOD HEALTH HABITS

	Never	Seldom	Usually	Often	Always
	1	2	3	4	5
Area 11 - IS AWARE OF DANGERS INVOLVED IN SMOKING, DRINKING, DRUGS.					
11.1 Shows he is aware of the dangers of smoking.	1	2	3	4	5
11.2 Shows he is aware of the dangers of drinking.	1	2	3	4	5
11.3 Shows he is aware of the dangers of smoking and drinking.	1	2	3	4	5
11.4 Shows he is aware of the dangers of using drugs.	1	2	3	4	5

ANALYSIS OF INSTRUMENTS

The purpose of this section is to provide the Quality Education Program Study with information concerning the identification and selection of test instruments for assessing pupil development with regard to the Program's stated Ten Goals of Quality Education.

The identification and selection of test instruments for the Quality Education Program Study was done at two sites: the University of Alabama and the University of Nevada, Las Vegas. Dr. Sam Leles directed the work at the University of Alabama site, and Dr. James Case directed the work at the University of Nevada, Las Vegas site.

The test instrument identification and selection procedure at both sites was divided into three phases as follows:

Phase 1 — The initial identification at each site of test instruments for all ten goals of the Quality Education Program Study.

Phase 2 — The preliminary screening of the test instruments identified in Phase 1 for Goals I, III (Secondary), V, VIII, IX, and X (University of Nevada, Las Vegas), and Goals II, III (Elementary), IV, VI, and VII (University of Alabama).

Phase 3 — The final screening and analysis of the remaining test instruments from Phase 2.

After completion of Phase 1, the University of Alabama site and the University of Nevada, Las Vegas site, exchanged listings of the instruments thus far identified for all ten goals and completed Phases 2 and 3, using combined listings of instruments from both sites.

An extended description of each of these three phases of the identification and selection procedure as carried out at the University of Nevada, Las Vegas site, follows:

Phase 1 The Initial Identification of Test Instruments for The Ten Goals.

In mid-February, two graduate students at each University site were employed to make the initial identification search of test instruments for all ten goals of the Quality Education Program Study. The graduate students had previous teaching experience in public schools, and had taken considerable course work in testing, test analysis, test selection, etc., during their current graduate studies. All searchers were, therefore, familiar with the sources for the identification of test instruments.

The searchers were instructed to identify all possible instruments for all ten goals. The initial identification listing was to include the following for each instrument: title, form, author or publisher, date, grade level, a brief description of the appropriate uses of the instrument, and a bibliography notation on where the instrument was located during their search.

The criteria for the initial identification of an instrument was that the instrument appropriately measure any characteristic related to the following description of the ten goals:

I - Self Understanding
II - Understanding Others
III - Basic Skills
IV - Interest in School and Learning
V - Good Citizenship
VI - Good Health Habits
VII - Creativity
VIII - Vocational Development
IX - Understanding Human Accomplishment
X - Preparation for a Changing World

The following is a summary of the number of instruments initially identified by goal at the University of Nevada, Las Vegas site, during Phase 1:

I - 63	VI - 44
II - 43	VII - 35
III - 61	VIII - 37
IV - 36	IX - 35
V - 27	X - 28

These numbers of instruments were identified by a thorough search of the facilities at the University of Nevada, Las Vegas, and at the University of California at Los Angeles.

A listing of the above identified instruments was then sent to the Alabama site. A combined listing of the instruments identified at both sites, at the completion of Phase 1, gave the following number of instruments by goal (corrected for instruments concurrently identified at both sites):

I - 74	VI - 65
II - 56	VII - 57
III - 87	VIII - 62
IV - 53	IX - 55
V - 49	X - 50

A table summary of the numbers of test instruments identified and analyzed by goal for the Ten Goals of Quality Education is listed below. This listing and subsequent final selection of goal-related instruments are not to be considered as exhaustive nor listed in priority form.

SUMMARY

Number of Test Instruments Identified and Analyzed by Goal for The Ten Goals of Quality Education

Goal	No. of Instruments Identified in the Initial Search (UA + UNLV)	No. of Duplicate Instruments	No. of Instruments Analyzed	No. of Instruments Selected
I	84	10	74	26
II	65	9	56	18
III	97	10	87	39
IV	59	6	53	14
V	54	5	49	17
VI	71	6	65	20
VII	57	0	57	10
VIII	65	3	62	24
IX	59	4	55	19
X	53	3	50	22
Totals	664	56	608	209

Phase 2 The Preliminary Screening of the Test Instruments Identified in Phase 1.

The University of Nevada, Las Vegas site, performed a preliminary screening of test instruments from the above described combined listings for Goals: I, III(Secondary), V, VIII, IX, and X. The University of Alabama site concurrently performed a preliminary screening of the instruments from the combined listings for Goals: II, III(Elementary), IV, VI, and VII.

The following criteria were used at both University sites for the preliminary screening of the initially identified instruments from Phase 1 relating to each goal.

Goal One

The instrument must measure and/or identify those characteristics or attributes that provide information that would permit an individual to develop a better understanding of himself and his worth to society.

Goal Two

The instrument must measure and/or identify the individual's extent of acquiring understanding and appreciation of persons belonging to social, cultural, and ethnic groups different from his own.

Goal Three

The instrument must measure and/or identify the individual's extent of acquisition and/or mastery of the basic skills in the use of words and numbers.

Goal Four

The instrument must measure and/or identify the individual's acquisition of positive attitudes toward school and toward the learning

process.

Goal Five

The instrument must measure and/or identify habits and/or attitudes of an individual that are associated with responsible citizenship.

Goal Six

The instrument must measure and/or identify the individual's acquisition of good health habits and understanding the conditions necessary for the maintenance of physical and emotional well-being.

Goal Seven

The instrument must measure and/or identify the traits or characteristics encouraging creativity.

Goal Eight

The instrument must measure and/or identify the individual's knowledge and/or understanding of the opportunities open to him for preparing himself for a productive life.

Goal Nine

The instrument must measure and/or identify the individual's knowledge of, and/or understanding of, and appreciation of, human achievement in the natural sciences, the social sciences, the humanities, and the arts.

Goal Ten

The instrument must measure and/or identify those characteristics or attributes of an individual that relate to preparation for a life of change and unforeseeable demands.

Phase 3 The Final Screening and Analysis of The Test Instruments Remaining After Phase 2.

After the preliminary screening of the test instruments in Phase 2, the total number of instruments for each goal was reduced to approximately half.

The following criteria were used at both sites for the final screening and analysis of the test instruments remaining from Phase 2:

Goal One

The instrument must measure and/or identify characteristics and/or attributes of self concept, and knowledge and/or understanding of societal structures and relationships, and his relationship to these. Examples of the foregoing were: social emotional adjustment; response to ideas, people and established institutions; sense of personal worth, personal freedom, belonging; being with others; political, social, and religious values; emotional adjustment; personal preferences; self confidence; needs and problems identification; friendliness; integrity; leadership and responsibility; value complex development; emotional maturity.

Goal Two

The instrument must measure and/or identify traits or characteristics an individual achieves in attempting to understand and appreciate other persons belonging to social, cultural, and ethnic groups. Examples of the foregoing are: social standards, anti-social tendencies, community relations; generalized attitudes toward nationality, racial, and religious groups; a study of what different people will do in different situations; morality and personality traits, perception of others; independence, leadership, interpersonal traits; and social distance.

Goal Three

The instrument must measure and/or identify the individual's extent of acquisition and/or mastery of the basic skills in: acquiring ideas through listening and reading; communicating through writing and speaking; handling mathematical operations, and the ability to reason logically and to respect evidence. Examples of the foregoing were: assessment of reading comprehension, progress and growth; assessment of vocabulary, reading speed and accuracy; measurement of auditory memory and alertness; sound-symbol association ability; sensitivity to grammatical structure; listening ability; understanding of word meaning and sentence meaning; location of information; ability to select central ideas and skim; ability to think critically, draw influences, recognize assumptions and reason logically; spatial and numerical reasoning; measurement of concepts and skills in structure and number; recognition and application of mechanics of writing, building of sentences and paragraphy; measurement of arithmetic problem-solving abilities.

Goal Four

The instrument must measure and/or identify positive attitudes toward school and learning. Descriptions include school life; interest index; attitudes toward disciplinary procedure, play, vocation and school work; opinion of school, interests, and subjects.

Goal Five

The instrument must measure and/or identify knowledge of and habits and/or attitudes associated with: loyalty to the fundamental principles of a free democratic society; effective participation in group activities either as a leader or follower; an appreciation and acceptance of the necessity for earning a living; the acceptance of the basic

ethical values of group living, e.g., honesty, concern for the less fortunate, etc. Examples of the foregoing were: assessment of knowledge and understanding of political participation, government organization and services; familiarity with issues that confront citizens in a democrary, e.g., urban problems, economic affairs, foreign policy; knowledge and understanding of the United States Constitution and federal government policies and political participation; assessment of attitudes toward changing the Constitution; assessment of actual and desired political-social activism; assessment of values relative to political controls; measurement of knowledge and understanding of democratic principles of the United States; understanding of social change; measurement of social conformity, prejudice, and degree of open/closed mind; assessment of active involvement in current social or political problems; identification of economic wants; measurement of appreciation of the role of economic factors in one's life.

Goal Six

The instrument must measure and/or identify health behavior from the viewpoint of student practices; understanding conditions necessary for maintaining good health habits; knowledge and application of safety education concept; practices and attitudes one holds regarding health habits; the causes and effects related to good health.

Goal Seven

The instrument must measure and/or identify factors in creative thinking. Examples of related terms are: logical thinking, divergent thinking, ideational fluency, expressional fluency, optimistic-imagination, style preferences, generalizing, analyzing, synthesizing and evaluating.

Goal Eight

The instrument must measure and/or identify the individual's knowledge and/or understanding of the educational and vocational opportunities open to him for preparing himself for a productive life. It is explicitly implied that the test instruments selected for this goal will also be used for educational/vocational guidance purposes. Examples of the foregoing were: measurement of mental abilities important for academic success and related endeavors outside the classroom; measurement of scholastic ability of students planning to go to college; prediction of success and satisfaction in an occupation; preference for, liking for, or interest in a vocation; assessment of work values; measurement of aptitude for skills in selected occupations; interest in selected occupational activities; measurement of abilities necessary for success in selected occupational fields; measurement of attitudes toward a vocation; assessment of personal qualities related to job success or failure; educational and vocational planning inventories.

Goal Nine

The instrument must measure and/or identify the individual's knowledge of and/or understanding of, and appreciation of, human achievement regarding the transforming conceptions of modern science, basic socialogical and psychological principles, and the differentiation of the worthy from the worthless in the arts and humanities. Examples of these were: measurement of understanding of music and artistic heritage; measurement of knowledge and comprehension of literature; assessment of understanding of recent social and scientific developments; knowledge, understanding, and appreciation of art, music, drama, and philosophy; measurement of awareness of works of famous composers, writers, and

artists; measurement of ability to interpret literary materials; measurement of understanding of general scientific principles, the nature of scientific inquiry and scientific reasoning.

Goal Ten

The instrument must measure and/or identify those characteristics or attributes of an individual that relate to preparation for a life of change and unforeseeable demands. This goal explicitly implies a necessity for continuing education - both formal and/or informal, both recreational and/or vocational (or occupational) - to fill the life-long needs of the individual and society. Selection criteria for test instruments for this goal must, therefore, reflect general interests, attitudes, preferences, etc., toward work and leisure; thus the selected instruments would provide information useful to an individual for future leisure-time and vocational planning - planning that is necessary because of the rapidly changing economic and recreational nature of our world. Examples of these were: identification of behavior preferences; identification of personal problems, e.g., personal finance, planning for future, personal interests; measurement of variability and adaptability; desire for responsibility; interest in self-employment; assessment of aspirations at both idealistic and realistic levels; measurement of independence and resourcefulness; assessment of values which influence manner of coping with life-problems; classification of individual as to type, theoretical-non-theoretical, political-non-political, etc.

GOAL SIX: GOOD HEALTH HABITS

I N S T R U M E N T S

T I T L E	FORM	AUTHOR OR PUBLISHER	DATE	GRADE LEVEL	DESCRIPTION	REF. NO.
An Inventory of Certain Practices on Health		Margaret Leonard California State Dept. of Education, Sacramento, Calif.	1949	Any	88 statements measure health behavior from standpoint of the student's practices.	739
College Health Knowledge Test		Stanford University Press Stanford, Calif.	1959	Sr.Hi. Coll.	100 Multiple choice items. Tests knowledge in 11 areas	733
Nutrition Information Test		Frederick K. Lander Wagner College Staten Island, N. Y.		Jr. High	33 question test on nutrition	736
Dental Health Practices Inventory		Irene Brown University of Calif. Los Angeles, Calif.	1959	1-4	31 items, many illustrated	737
Scale for the Measurement of Attitudes Toward Healthful Living		William C. Meise Slippery Rock State Coll. Slippery Rock, Penna.	1962	Any	A Likert type scale, contains 100 items constructed to evaluate opinions in 12 health areas.	738
Stimulants and Depressants Test	2nd Ed.	Wagner College Staten Island, N. Y.	1958	Jr.Hi. Coll.	33 question multiple-choice test; copies may be obtained from the author	728
Tuberculosis Information Test	3rd Ed.	Wagner College Staten Island, N. Y.	1953	Jr.Hi. Coll.	20 question multiple-choice measures knowledge concerning T.B. Copies may be obtained from author.	729

Health Education Test	B	Psychometric Affiliates	1957	7-12	100 item test, multiple choice and true-false items; knowledge and application of knowledge is tested. Norms based on 6000 students.	730
Health Behavior Inventory, Elem. Level	Elem.	Sylvia Yellen California Test Bureau	1962	Elem. 3-6	9 scores. Examinee selects one of three choices to show whether the practice is habitual, occasional, or non-existent so far as he is concerned. Takes 20-30 mins. IBM. One form.	611
Health Behavior Inventory, Jr. High Level	Jr. Hi.	E. Harold LeMaistre California Test Bureau	1963	7-9	Inventory divided into three parts: practices, attitudes, and knowledge regarding health habits. Time: 30-50 mins.	612
Health Behavior Inventory, Sr. High Level	Sr. Hi.	Marion B. Pollock California Test Bureau	1964	10-12	11 scores: Personal health, family health, dental health, infection-disease, safety-first aid, exercise-rest-recreation; inventory yields data regarding health habits, attitudes, and knowledge.	613
Health and Safety Education Test: Natl. Achievement Tests	A	Lester D. Crow, Loretta C. Ryan Psychometric Affiliates	1947-60	3-6	Test divided into four parts: Good health and safety, cause and effect in relation to health, facts about health-safety, application of health-safety rules; 10 application situations are presented	614

GOAL SIX: GOOD HEALTH HABITS — I N S T R U M E N T S

T I T L E	FORM	AUTHOR OR PUBLISHER	DATE	GRADE LEVEL	DESCRIPTION	REF. NO.
High School Health Every Pupil Scholarship Test	New form each April	Bureau of Educational Measurements	1963	High Sch.	40-45 mins. Norms available following testing program.	616
Health Practice Inventory		Edward G. Johns and Warren L. Juhnke Stanford University Press Stanford, California	1952	High Sch.	100 item inventory appraises health practices. 13 health areas are represented.	518
Health Knowledge Test	FA	C. Harold Veenker Purdue University Lafayette, Indiana (Printed in Reference)	1959	7	70-item test measures the extent of health knowledge	520
Thompson Smoking and Tobacco Knowledge Test		Clem W. Thompson Mankato State College Mankato, Minn. (Printed in Reference)	1964	7 & above	32 multiple-choice items, constructed from valid and scientifically established concepts; 2 sections--physiological and personal and psychological	521
Health Tests	A2,4, 6	Division of Educational Service, Los Angeles City Schools	1958	Students	These tests were developed by school personnel and used in the extensive evaluation of the school district that was completed in 1960. The A2 test consists of 27 picture items, and the A6 test 50 multiple choice items.	115

Health Behavior Inventory	I	A. D. Colbank	1964	7-9	15 scores: nutrition, personal cleanliness and skin care, mental health, personal health, community health, infection and disease; practices, attitudes, knowledge.	117
Health and Safety Education Test: Natl. Achievement Tests	A	Acorn Publishing Co.	1947	3-6	5 scores: good habits, cause and effect, facts, application of rules, total.	109
Health Test: Natl.		Acorn Publishing Co.	1937-49	3-8	5 scores: recognizing best habits, health comparisons, causes and effects, health facts, total.	109

I N D E X

GOAL (Cross Reference)	REFERENCE	CODE NO.
#6, #9	Eric-Research in Education. Washington, D. C.: U. S. Dept. of HEW, Office of Education, 1970.	109
#6, #1	Buros, O. K. (Ed.) Tests in Print. New Jersey: The Gryphon Press 1961, p. 112.	115
#1, #2, #6	Ibid., p. 123.	117
#6	Solleder, Marian K. "Evaluation Instruments in Health Education." Journal of Health, Physical Education, and Recreation, XXXII, No. 8 (November, 1961), pp. 42-45	518
#6	Veenker, C. Harold. "A Health Knowledge Test for the Seventh Grade," Research Quarterly, XXX, No. 3 (October, 1959), pp. 338-348.	520
#6	Thompson, Clem W. "Thompson Smoking and Tobacco Knowledge Test," Research Quarterly, XXXV, No. 1, (March , 1964), pp. 60-68.	521
#6	Buros, O. K., The Sixth Mental Measurements Yearbook. New Jersey: The Gryphon Press, 1965, p. 960.	611
#6	Ibid., p. 961.	612
#6	Ibid., p. 962.	613
#6	Ibid.	616
#6	Solleder, Marian. Evaluation Instruments in Health Education. Washington, D. C.: American Association for Health, Physical Education and Recreation, The National Education Association, 1968, p. 4.	728
#6	Ibid., p. 4.	729
#6	Ibid.	730
#6	Ibid., p. 9.	733

#6	Ibid., p. 3.	736
#6	Ibid., p. 3.	737
#6	Ibid., p. 10.	738
#6	Ibid., p. 9.	739